

PART B - FEE(S) TRANSMITTAL

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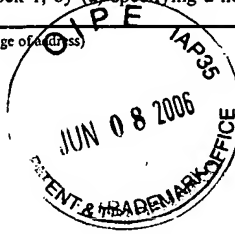
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7590

03/08/2006

Kenneth I Kohn
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Connie Herty

(Depositor's name)

Connie Herty

(Signature)

June 8, 2006

(Date)

06/12/2006 HTECKLU2 00000059 10018201

01 FEE: 2501	700.00 OP			
02 FEE: 8001	8.00 OP			
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.

10/018,201

04/02/2002

Michael Chopp

1059.00063

4921

TITLE OF INVENTION: NITRIC OXIDE DONORS FOR INDUCING NEUROGENESIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	06/08/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
GEMBEH, SHIRLEY V	1614	514-565000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KOHN & ASSOCIATES, PLLC

2 KENNETH I. KOHN

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

HENRY FORD HEALTH SYSTEM

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

DETROIT, MICHIGAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 2

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*deficiencies only

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Kenneth I. Kohn

Date June 8, 2006

Typed or printed name Kenneth I. Kohn

Registration No. 30,955

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